Work Orde April 26, 2010 2		157										Page
Item ID: Revision ID:	D4054-009			Accept					Setup S			
	Tube Assemble 4/26/10 5/04/10	Start Qty: 8.00 Req'd Qty: 8.00			Cust Item I Customer:	D:			S	Stop		
Approvals:	Process Pla	ın:	Date:			ate:		I		start Stop		
Sequence ID/ Work Center ID)	Operation Description		Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Rejec Qty		eject umber	Insp. Stamp
Draw Nbr	Rev	ision Nbr									- · · - · ·	
D4054 100 Small Fab Small Fab		Install sleev	as per Dwg D4054 res and nuts as per Dwg D4054.	0.00 0.00	n h	10/03	5/14	8X)				
110 		QC5- Inspect part comp	leteness to step on W/O	0.00	slosle4			(KB))			

Quality Control

Dart Ae	rospace Li	id						•
W/O:			WC	RK ORDER CHANG	ES			
DATE	STEP	PR	PROCEDURE CHANGE			Date Qt	Approval Chief Eng / Prod Mgr	Approva QC Inspect
Part No):	PAR #:	Fault Cate	gory:	_ NCR: Yes	No DQA :	Date: _	
	Resc	olution:	Disposition	1:	_ QA: N/C CI	Date: _		
NCR:			WORK ORDE	ER NON-CONFORMA	NCE (NCF	R)		
DATE	CTED	Description of NC	escription of NC Corrective Action			Verification	n Approval	Approva
DATE	STEP	Section A	Initial Chief Eng	Action Description Chief Eng	Sign & Date	Section C	Chief Eng	QC Inspect
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NOTE: Date & initial all enties

Work Order ID 58157

April 26, 2010 2:19:23 PM



Page 2

Item ID:

D4054-009

Accept

Setup Start

Stop



Revision ID:

Item Name:

Required Date: 5/04/10

Tube Assembly

Start Date:

4/26/10

Start Oty: 8.00

Reg'd Oty: 8.00



Cust Item ID:

Customer:

Draw

Number

Reference:

Approvals:

Process Plan:

Date:

Tooling:

SPC (Y/N):

Date: Date:

Draw

Rev.

Plan

Code

Run Start

Reject

Otv

Stop

Reject

Number

Sequence ID/ Work Center ID

120

Packaging

Operation Description

Identify as per dwg & Stock Location



Date:

Set Up/ Run Hours

0.00

0.00

10-5-24

Accept

Oty

Insp.

Stamp

Packaging

130

Ouality Control

QC21- Final Inspection - Work Order Release

Memo

0.00

Memo

0.00

NA10-5-12

Dart Ae	rospace	Ltd							* *
W/O:				WO	RK ORDER CHANG	ES			
DATE	STEP		PR	PROCEDURE CHANGE				Approval Chief Eng / Prod Mgr	Approva QC Inspecto
Part No: PAR #: Fault Category: NCR: Yes No DQA: Date Resolutior: Disposition: QA: N/C Closed: Date NCR: WORK ORDER NON-CONFORMANCE (NCR) DATE STEP Description of NC Corrective Action Section B Verification Approv									
	R	esolutio	n:	Disposition	:	_ QA: N/C C	losed:	Date: _	
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DATE					Action Description Chief Eng		& Section C		QC Inspecto
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NOTE: Date & initial all enties

Picklist Print April 26, 2010 2:19):22 PM										<u>-</u>	Page
Work Order ID: 58 Parent Item: D4 Parent Item Name: Comments:	157 4054-009 Tube Assembly IPP rev A 10.01.19	new issue EC	verifie	d by:DD	1881 1984 1884 1884 1884 1884 1884				tart Date: 4/26. Start Qty: 8.00	/10	Required Date: Required Qty:	
Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Remaining Qty To Pick	Qty Issued	Date Issued	Status
AN818-8D		Purchased	No			100	Each	29.0000	8.0000		······································	
M6061T6T0.500W.049		Purchased	No	Main Wa	ation arehouse	100	29 9 20 f	<u>Loc Code</u> 21.6072	4.6316	8 X	m. L	2/os/1
			,	Main Wa	ation X	16		Loc Code		1-63	16 - M- - loli	L
MS20819-8D	<u> </u>	Purchased	No	Wareho	ouse	100 Loc	Each	40.0000 Loc Code	8.0000			

Warehouse Loc Oty Loc Code

Location

Main Warehouse

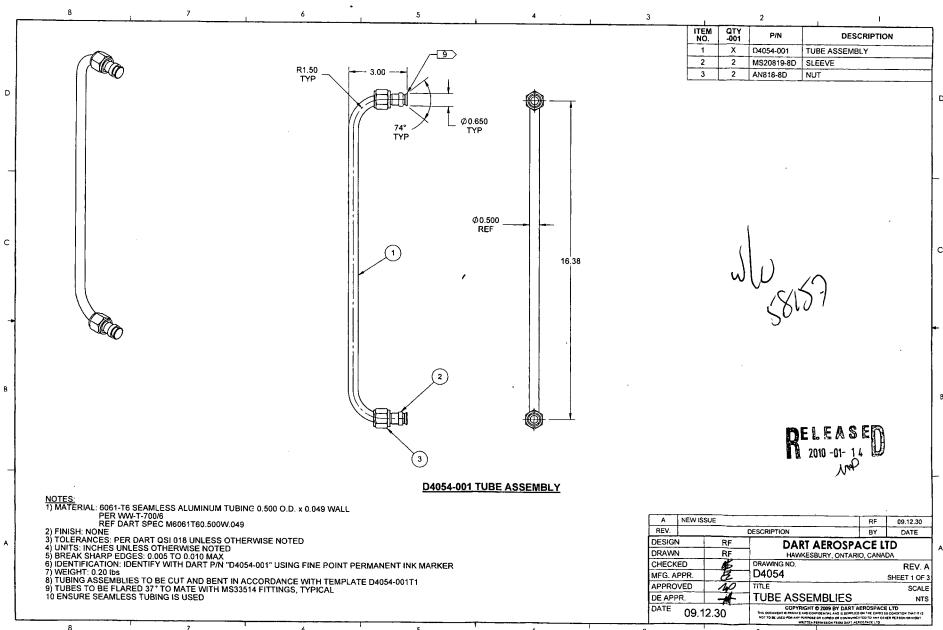
ST323 40

113795 40

-8x m/ 10/05/04

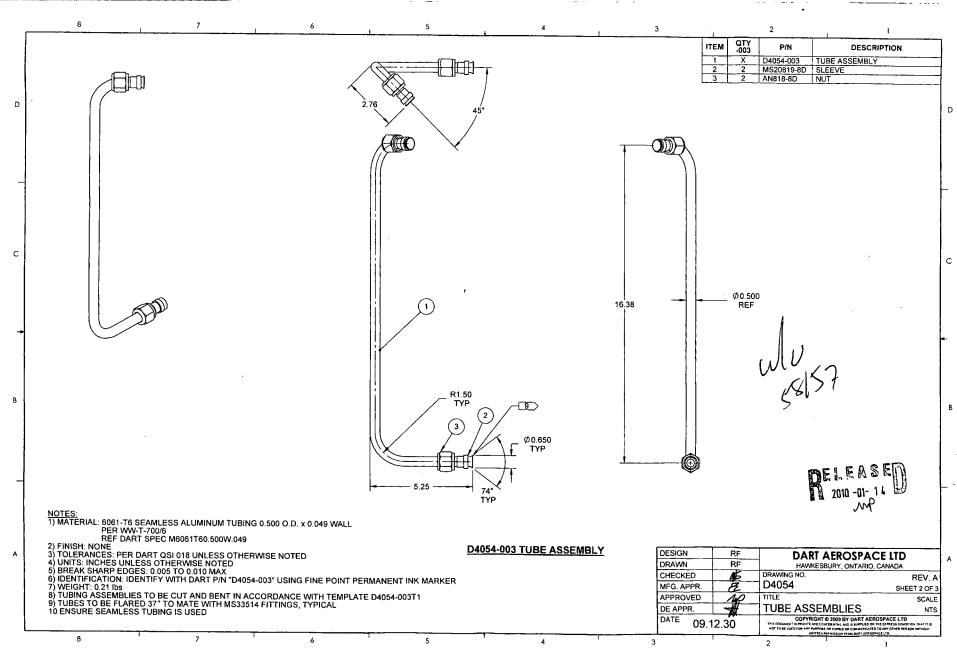
Dart Ae	rospace	e Ltd							\$
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	R	esolutio	n:	Disposition	:	_ QA: N/C Clo	sed:	Date: _	
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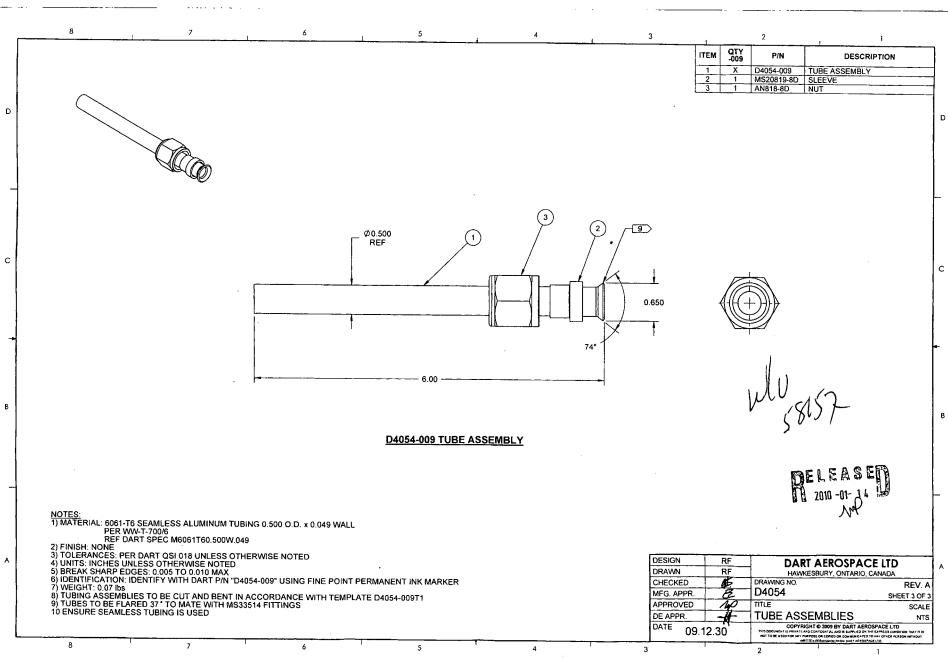
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	Re	esolutior:	Disposition: QA: N/C Closed: Date							_ Date: _	
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				Chief Eng	Chief Eng		Date				
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DATE			Description of NC	Corrective Action		ion B	Verification	Approval	Annrova	
DATE	SIEP	STEP Section A		Initial Chief Eng	Action Description Chief Eng	Sign Date	& Section C	Chief Eng	Approva QC Inspecto	
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NOTE: Date & initial all entries



Dart Aerospace Ltd W/O: **WORK ORDER CHANGES Approval Approval** DATE **STEP** PROCEDURE CHANGE By Date Qty Chief Eng / Prod Mgr QC Inspector Part No: ______ PAR #: ____ Fault Category: _____ NCR: Yes No DQA: ____ Date: ____ Resolution Disposition: _____ QA: N/C Closed: _____ Date: ____ WORK ORDER NON-CONFORMANCE (NCR) NCR: **Corrective Action** Section B **D**escription of NC Verification **Approval DATE Approval STEP** Sign & Initial **Action Description** Section A Section C Chief Eng QC Inspector Chief Eng Chief Eng Date

NOTE: Date & initial all entres